

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ader the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number J-3315 Att rn y Dock t Number DECLARATION FOR UTILITY OR James W. Yonker First Named Inv ntor DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number January 22, 2002 Filing Date Declaration Declaration Submitted after Initial Submitted Group Art Unit Filing (surcharge with Initial (37 ČFR 1.16 (e)) Filing **Examiner Name** required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PACKAGED RODENTICIDE (Title of the Invention) the specification of which is attached hereto as United States Application Number or PCT International was filed on (MM/DD/YYYY) (if applicable). and was amended on (MM/DD/YYYY) Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuationin-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed **Certified Copy Attached?** Prior Foreign Application Number(s) Foreign Filing Date Priority Country Not Claimed (MM/DD/YYYY) Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Pat nt Application

| | istomer Num Bar Code La | | 165 | | OR 🗌 (| Correspondence address below |
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| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | | | | | ed for this unsigned inventor |
| Given Name James W. | | | Family Name Yonker or Surname | | | |
| Inventors Signature Date 4/9/07 | | | | | | Date 4/9/07 |
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| NAME OF SECOND INVENTOR | : | | | A petiti | on has been f | led for this unsigned inventor |
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| City Racine | WI State | | | ZIP 53402 | | US Country |
| Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. | | | | | | |



PE void Please to

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1_ of 1_

| Name of Additional Joint Inventor, if an | y: | | _ | A petition has bee | n filed for | this unsigned inventor | |
|--|-------|-------------------|------------------------|------------------------|----------------------|------------------------|--|
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| Given Name (first and middle [if any]) | | | _ | Family Name or Surname | | | |
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| Given Name (first and middle [if any]) | | | Family Name or Surname | | | | |
| Dingwen (n.m.i.) | | | Li | | | | |
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| Mailing Address Xu Hong Bei Road | | | | | | | |
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Rease type a plus sign (+) inside this box PTO/SB/81 (02-01)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number. STENT A TRANSMEN Application Number January 22 2002 Filing Date James W. Yonker First Named Inventor POWER OF ATTORNEY OR Packaged Rodenticide Title **AUTHORIZATION OF AGENT Group Art Unit Examiner Name** Attorney Docket Number J-3315

| I hereby appoint: | | | | | | |
|---|--------------------------------|---|--|--|--|--|
| Practitioners at Custome | er Number 28165 | ⊳ 28165 | | | | |
| OR ✓ Practitioner(s) named be | low: | PPTENT TRANSMARBER Flode Label here | | | | |
| | ame | Registration Number | | | | |
| David J. Houser | ano | 29,172 | | | | |
| Carl R. Schwa | rtz | 29,437 | | | | |
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| as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. | | | | | | |
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| | | 1145 | | | | |
| l am the: ✓ Applicant/Inventor. | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | |
| | GNATURE of Applicant or Assign | ACCUPATION OF THE PROPERTY OF | | | | |
| Brian-T D | | | | | | |
| Name | · A 18 | . 4 | | | | |
| Signature | 35 | L. A. | | | | |
| Date 109-7-0 | 9, 2002 Apr. | :/ (SX)2002 | | | | |
| NOTE: Signatures of all the inventors or a forms if more than one signature is require | | st or their representative(s) are required. Submit multiple | | | | |
| *Total of 2 forms are | | | | | | |

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POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

| January 22, 2002 |
|----------------------|
| James W. Yonker |
| Packaged Rodenticide |
| |
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| J-3315 |
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| I hereby appoint: | <u> </u> | | | | | |
| ✓ Practitioners at | Customer Number 28165 | > 28165 | | | | |
| OR | <u> </u> | PRIME GUEDING BAI Code Label | here | | | |
| ✓ Practitioner(s) r | named below: | | | | | |
| | Name | Registration Number | | | | |
| David J. Ho | | 29,172 | | | | |
| Carl R. | Schwartz | 29,437 | | | | |
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| I am the: | | | | | | |
| ✓ Applicant/Inve | ntor. | | | | | |
| Assignee of re | cord of the entire interest. See 37 CFR | R 3.71. | | | | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | |
| | SIGNATURE of Applicant or Assi | signee of Record | | | | |
| Name Jar | nes W. Yonker Nathan R. We | Vestphal Michael J. Skalitzky | | | | |
| Signature | - W. Inter Morthon Z. | Wetch M. Sattru | · | | | |
| Date | 4/9/02,2002 04 | -08 - , 2002 <u>JAPRI</u> , 2002 | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | | | | |
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| ✓ *Total of 2 | forms are submitted. | | | | | |

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